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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/696,909	10/29/2003	James B. Lorens	7946-79836-01	9257
74839 Klarquist Spar	7590 03/17/200 kman LLP	8	EXAMINER	
121 SW Salmon St			REDDIG, PETER J	
Floor 16 Portland, OR 9	97204		ART UNIT	PAPER NUMBER
			1642	
			MAIL DATE 03/17/2008	DELIVERY MODE PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary

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	PETER J. REDDIG	1642	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Peter J. Reddig</u> .	(3) <u>Jim Diehl</u> .		
(2) <u>Susan W. Graff</u> .	(4)Tonya Harding.		
Date of Interview: 07 March 2008.			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d)☐ Yes If Yes, brief description:	e)		
Claim(s) discussed: 1.			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached. g	ı)⊠ was not reached. h)□ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Discussed 112 1st and 2' and/or arguments for consideration</u> .	nature of what was agreed to rejections of record. Applica	if an agreement ants will submit a	was <u>mendments</u>
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no c allowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTFILE A STATEMENT OF THE SUBSTANCE OF THE INTE requirements on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM,	been filed, APP OAYS FROM T WHICHEVER IS	LICANT IS 'HIS
	/Karen A Canella/		
	Primary Examiner, Art Unit 16		
Examiner Note: You must sign this form unless it is an	Examiner's signature, if requi	red	